

FROM McANDREWS, HELD, & MALLOY

(FRI) 6.30'06 17:38/ST. 17:38/NO. 4861050834 P 1



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TO: Examiner Eugene Yun
Group Art Unit 2682

FAX NO.: 571 273 8300

FROM: Michael T. Cruz

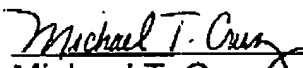
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CLIENT: 1772

MATTER: 17463US02

Number of Pages This Transmission (Including Cover Page): **14**

I hereby certify that the attached correspondence, including a PTO transmittal form (1 page), a PTO fee transmittal (1 page, in duplicate), a petition for an extension of time (1 page, in duplicate) and an amendment (8 pages), is being sent via facsimile transmission to the United States Patent and Trademark Office on June 30, 2006.


Michael T. Cruz
Reg. No. 44,636

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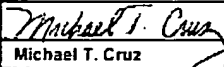
FROM McANDREWS, HELD, & MALLOY

JUN 30 2006

(FRI) 6.30'06 17:39/ST. 17:38/NO. 4861050834 P. 3

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2006		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number 09/788,061	Filing Date February 16, 2001
TOTAL AMOUNT OF PAYMENT (\$) 450.00		First Named Inventor Theodore Trost	Examiner Name Eugene Yun
METHOD OF PAYMENT (check all that apply)		Art Unit 2682	Attorney Docket No. 17463US02
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____			
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>13-0017</u> Deposit Account Name: <u>McAndrews Held & Malloy</u> For the above-identified deposit account, the Director is hereby authorized to (check all that apply)			
<input checked="" type="checkbox"/> Charge Fee(s) indicated below <input type="checkbox"/> Charge Fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fees(s) <input checked="" type="checkbox"/> Credit any overpayments under 37 CFR 1.16 and 1.17			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)			
1. BASIC FILING, SEARCH, AND EXAMINATION FEES			
Application Type	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	
Design	200	100	
Plant	200	100	
Reissue	300	150	
Provisional	200	100	
2. EXCESS CLAIM FEES			
Fee Description	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Each claim over 20 (including Reissues)	50	25	
Each independent claim over 3 (including Reissues)	200	100	
Multiple dependent claims	360	180	
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
-20 or HP	x	=	Multiple Dependent Claims Fee
HP = highest number of total claims paid for, if greater than 20			
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
-3 or HP	x	=	Multiple Dependent Claims Fee
HP = highest number of independent claims paid for, if greater than 3			
3. APPLICATION SIZE FEE			
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).			
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)
-100	/50	(round up to a whole number)	x
4. OTHER FEE(S)			
Non-English Specification, \$130 fee (no small entity discount)			Fee Paid (\$)
Other (e.g., late filing surcharge): <u>Petition for Two-Month Extension of Time (\$450)</u>			450.00
SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	44,636
Name (print/type)	Michael T. Cruz	Telephone	(312) 775-8000
		Date	June 30, 2006

JUN 30 2006

PTO/SB/21 (09-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/788,061	
		Filing Date	February 16, 2001	
		First Named Inventor	Theodore Trost	
		Art Unit	2682	
		Examiner Name	Eugene Yun	
Total Number of Pages in This Submission		13	Attorney Docket Number	17463US02
ENCLOSURES (check all that apply)				
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment (8 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD		
		<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Return-Receipt Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below):		
Remarks		Fee Transmittal Form (1 Page) and Extension of Time Request (1 Page) are filed in Duplicate.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT				
Firm	McAndrews Held & Malloy, Ltd.			
Signature	<i>Michael T. Cruz</i>			
Printed Name	Michael T. Cruz			
Date	June 30, 2006			
CERTIFICATE OF FAX TRANSMITTAL				
I hereby certify that this correspondence is being sent via facsimile transmission to Examiner Eugene Yun at the United States Patent and Trademark Office at (571) 273-8300 on June 30, 2006.				
Name (Print/typc)	Michael T. Cruz	Registration No. (Attorney/Agent)	44,636	
Signature	<i>Michael T. Cruz</i>	Date	June 30, 2006	

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FROM McANDREWS, HELD, & MALLOY

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Approved for use through 07/31/2006. OMB 0851-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2006		<i>Complete if Known</i>					
		Application Number	09/788,061				
		Filing Date	February 16, 2001				
		First Named Inventor	Theodore Trost				
		Examiner Name	Eugene Yun				
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	2682				
TOTAL AMOUNT OF PAYMENT (\$) 450.00		Attorney Docket No.	17483US02				
METHOD OF PAYMENT (check all that apply)							
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____							
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>13-0017</u> Deposit Account Name: <u>McAndrews Held & Malloy</u> For the above-identified deposit account, the Director is hereby authorized to (check all that apply)							
<input checked="" type="checkbox"/> Charge Fee(s) indicated below <input type="checkbox"/> Charge Fee(s) indicated below, except for the filing fee							
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fees(s) <input checked="" type="checkbox"/> Credit any overpayments under 37 CFR 1.16 and 1.17							
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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							<u>Small Entity</u>
<u>Fee Description</u>							<u>Fee (\$)</u>
Each claim over 20 (including Reissues)							25
Each independent claim over 3 (including Reissues)							100
Multiple dependent claims							180
<u>Total Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>		
-20 or HP		x		=	<u>Fee</u>		<u>Fee Paid (\$)</u>
HP = highest number of total claims paid for, if greater than 20							
<u>Indep. Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
-3 or HP		x		=			
HP = highest number of independent claims paid for, if greater than 3							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		
-100	/50	(round up to a whole number)	x		=		
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): <u>Petition for Two-Month Extension of Time (\$450)</u>							450.00
SUBMITTED BY							
Signature	<u>Michael T. Cruz</u>			Registration No. (Attorney/Agent)	44,636	Telephone	(312) 775-8000
Name (print/type)	Michael T. Cruz			Date	June 30, 2006		